PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number 10/612,364

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN											THAN	
(Column 1) (Column 2								TYPE [OR-	SMALL	ENTITY
TC	TAL CLAIMS		18					RATE	FEE		RATE	FEE
FO	Я		NUMBER	FILED	NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS minus 20= *					*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS 3 =						.ģ		X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	. -			+140=		OR	+280=			
*.lf	the difference	in column 1 is	"0" in c	xolumn 2		TOTAL	-	OR	TOTAL	750.00		
	C		MENDED	ENDED - PART II				SMALL I	ENTITY	OR	OTHER THAN SMALL ENTITY	
	(Column 1)		(Colur				וו	OWINEE !		1		
ENT A		REMAINING AFTER AMENDMENT	:	NUMI PREVIC PAID	DUSLY	PRESENT EXTRA *:		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total .	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	CLAIM	<u> </u>	4	X42=		OR	X84=	
I			JETH CE DE	·	00-311		j	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)	<u> </u>	(Colur	nn 2)	(Column 3)	Σ.	•	<u> </u>	-		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		8		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	SENIO ENIT	- C1 AD4	-	4	X42≖		OR	X84=	
┞	·	NIAHON OF WI	DETIPLE DEF	-EMDEM I	CLAIM		ال	+140=		OR	+280=	
		•						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	r	(Column 1)		(Colur		(Column 3)	ኒ .					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	*	Minus	**		=	┨┃	X\$ 9=		OR	X\$18=	
AME	Independent FIRST PRESE	* NTATION OF M	Minus	PENDENT	CL AIM	-	∦]	X42=		OR	X84=	
╚	+140=									OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **TOTAL ADDIT. FEE ADDIT. FEE												
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective January 1, 2003

106/2364

OLANIO 40 EV TO									()	<u> </u>	اربرب	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN	
T	OTAL CLAIM	s 101	(COIGH	(4) ()	(Co	umn 2)		TYPE		OF		ENTITY
F	OR		38,4400	R FILED				RATE	FEE	4	RATE	FEE
			NOMBE	H FILED	NUMBER EXTRA			BASIC FE	E 375.00	OF	BASIC FEE	750.0
TOTAL CHARGEABLE CLAIMS S minus 20= *					Ø'		X\$ 9=		OF	X\$18=		
INDEPENDENT CLAIMS								X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT +140=									1	1		
* If the difference in column 1 is less than zero, enter "0" in column 2									+	OR	<u> </u>	
CLAIMS AS AMENDED - PART II								101/12		OR		
		(Column 1)		(Colum		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
		CLAIMS REMAINING		HIGH			Ιг		ADDI-	1		
		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONA
	Total	*	Minus	**	<u> </u>	2	l	X\$ 9=	FEE		X\$18=	FEE
	Independent	*	Minus	***		=	 -			OR	A\$10 ≡	
	FIRST PRESI	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		L	X42=		OR	X84=	·
								+140=		OR	+280=	
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7		(Column 1)		(Colum	n 2)	(Column 3)				•	AUDIT, FEET	
		CLAIMS REMAINING		HIGHE			Г		ADDI-	1 1		400
ı		AFTER		PREVIOU		PRESENT		RATE	TIONAL			ADDI-
Į		AMENDMENT		PAID F		EXTRA		HAIE			RATE	TIONAL
	Total	*	Minus	**	<u> </u>	=	H	V0.0	FEE			FEE
	Independent	*	Minus	***		3	\vdash	X\$ 9=		OR	X\$18=	
1	FIRST PRESE	NTATION OF ML	LTIPLE DE	PENDENT (CLAIM			X42=		OR	X84=	
							-	+140=		OR	+280=	
							AD	TOTAL DIT. FEE		OR ,	TOTAL ODIT, FEE	-
_		(Column 1)	·	(Column		(Column 3)					-VII. FECE	
		CLAIMS		HIGHES	ST T		_			,	·	
		REMAINING AFTER		NUMBE		PRESENT	I		ADDI-	1		ADDI-
ı		AMENDMENT		PREVIOU PAID FO		EXTRA	1	RATE	TIONAL	1	RATE	TIONAL
ŀ	Total		Minus				\vdash		FEE	-		FEE
h	Independent		Minus	**		=	Ľ	(\$ 9=		OR	X\$18=	
Ī	FIRST PRESE	NTATION OF MU			LAIM			X42=	· 7	OR	X84=	
							T	140=		OR	+280=	
•••	CLC LINCHISCOINATIL	nn 1 is less than the nber Previously Pai	4 E4 181 TUIC	2 COAOE :- 4-				TOTAL		L	TOTAL	
							ADE	NT FEE		DR A	DOIT FEEL	
ſħ	ne "Highest Numl	ber Previously Paid	For (Total or	Independent)	is the h	o, orner 3. ighest number f	ound	in the app	ropriate box	n cohu	mo 1.	